SCHEDULE B (FEC Form 3) TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one) X 17
Any information copied from such Reports and Statements or for commercial purposes, other than using the name and		any person for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Ken Calvert for Congress Committee		
Full Name (Last, First, Middle Initial) A. First National Bank of Omaha	Date of Disbursement	
Mailing Address PO Box 2818		08 15 2012
City State Zip Code Omaha NE 68103-2818		Amount of Each Disbursement this Period
Purpose of Disbursement Credit Card Payment Candidate Name Category/		Iransaction ID : EXPB11316
	тур or: 2012	
State: District: Full Name (Last, First, Middle Initial) Congressional Liquors Mailing Address 404 First St SE		Date of Disbursement M M M / D D / Y M Y M Y M Y M Y M Y M Y M Y M Y M Y
City State Washington DC	Zip Code 20003	Amount of Each Disbursement this Period
Purpose of Disbursement Event Costs Candidate Name Category/ Type		Transaction ID : EDTB481EXPB11316
Office Sought: House Senate President State: Disbursement Formary Other of		
Full Name (Last, First, Middle Initial) Oreana Winery Mailing Address		Date of Disbursement
Mailing Address 205 Anacapa St City State Zip Code		08 15 2012
Santa Barbara CA 93101 Purpose of Disbursement		Amount of Each Disbursement this Period 300.00
Event Costs Candidate Name		1 Transaction ID : EDTB482EXPB11316
		[=5 =]
State: District:		

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

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